



Atty. Dkt. No. 061602-3325 *JFW*

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Emmerson et al.
Title: CLIENT-SERVER SYSTEM
Appl. No.: 10/099,977
Appl. Filing Date: 03/19/2002
Examiner: Bayerl, Raymond J.
Art Unit: 2173

<p align="center">CERTIFICATE OF MAILING</p> <p>I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as First Class Mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date below.</p> <p align="center"><u>LAURA MARKHAM</u> (Printed Name)</p> <p align="center"><u>Laura Markham</u> (Signature)</p> <p align="center"><u>1-18-06</u> (Date of Deposit)</p>

REQUEST FOR CONTINUED EXAMINATION (RCE)
TRANSMITTAL

Mail Stop RCE
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

This is a Request for Continued Examination (RCE) under 37 C.F.R. § 1.114 of the above-identified application. This RCE and the enclosed items listed below are being filed prior to the earliest of: (1) payment of the issue fee (unless a petition under 37 C.F.R. § 1.313 is granted); (2) abandonment of the application; or (3) the filing of a notice of appeal to the U.S. Court of Appeals for the Federal Circuit under 35 U.S.C. §141, or the commencement of a civil action under 35 U.S.C. §145 or §146 (unless the appeal or civil action is terminated).

1. Submission required under 37 C.F.R. §1.114: (check items that apply)

a. Previously submitted:

☐ Please enter and consider the amendment and/or reply previously filed on ____.

☐ Please consider the Affidavit(s)/Declaration(s) previously filed on ____ but not

~~01/23/2006 HDEHESS1 00000040 10099977~~ considered.

~~01 FC:1801 790.00 OP~~

01/23/2006 HDEHESS1 00000040 10099977

02 FC:1251

120.00 OP

01/23/2006 HDEHESS1 00000040 10099977

01 FC:1801 790.00 OP

☐ Please consider the arguments in the Appeal Brief or Reply previously filed on ____.

☐ Other ____.

b. Enclosed are:

☒ Amendment/Reply.

☐ Affidavit(s)/Declaration(s).

☒ Information Disclosure Statement.

☒ Form PTO/SB/08 with copies of 7 listed reference(s).

☐ Other .

Miscellaneous:

☐ Suspension of action of the above-identified application is requested under 37 C.F.R. § 1.103(c) for a period of ____ months.

The filing fee is calculated below:

	Claims as Amended	Previously Paid For	Extra Claims Present	Rate	Fee Totals
RCE Fee 1.17(e):				\$790.00	= \$790.00
Total Claims:	12	- 20	= 0	x \$50.00	= \$0.00
Independents	6	- 7	= 0	x \$200.00	= \$0.00
First presentation of any Multiple Dependent Claims:				+ \$360.00	= \$0.00
CLAIMS FEE TOTAL:					= \$790.00

☒ Applicant hereby petitions for an extension of time under 37 C.F.R. §1.136(a) for the total number of months checked below:

<input checked="" type="checkbox"/>	Extension for response filed within the first month:	\$120.00	1	\$120.00
<input type="checkbox"/>	Extension for response filed within the second month:	\$450.00		\$0.00
<input type="checkbox"/>	Extension for response filed within the third month:	\$1,020.00		\$0.00
<input type="checkbox"/>	Extension for response filed within the fourth month:	\$1,590.00		\$0.00
<input type="checkbox"/>	Extension for response filed within the fifth month:	\$2,160.00		\$0.00
EXTENSION FEE SUBTOTAL:				\$120.00
EXTENSION FEE ALREADY PAID: -				\$0.00
EXTENSION FEE TOTAL				\$120.00
CLAIMS AND EXTENSION FEE TOTAL:				\$910.00
<input type="checkbox"/>	Small Entity Fees Apply (subtract ½ of above):			\$0.00
<input type="checkbox"/>	Suspension of action requested under 37 C.F.R. § 1.103(c)			\$0.00
TOTAL FEE:				\$910.00

☐ Please charge Deposit Account No. 06-1450 in the amount of \$910.00. A duplicate copy of this transmittal is enclosed.

☒ A check in the amount of \$910.00 to cover the filing fee is enclosed.

☒ The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 06-1450. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 06-1450.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date January 18, 2006

FOLEY & LARDNER LLP
Customer Number: 27433
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By 

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